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Annual ministerial review: implementing the internationally agreed goals and commitments in regard to global public health

Statement submitted by Mujer para la Mujer, a non-governmental organization in consultative status with the Economic aad Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 30 and 31 of Economic and Social Council resolution 1996/31.

* E/2009/100.

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Statement*

Public Health must be understood as a meeting point where life sciences, social and behavioral sciences conclude in certain populations.

Public Health in México

Based on these concepts, our proposal is to change the ideas related to public health in our country like, "welfare", "public assistance", "health-healing for the poorest = charity" transforming them into a system or integral network for the right to health in which all citizens have access to cutting-edge technology to provide global medicine programs and not only Primary Health care.

This collaborative NETWORK is formed by the whole global community, scientific knowledge, federal and state government, including the local human rights community, as well as two currents: the approach of social medicine with an expression of priority in public health and the human rights framework. The objective of this NETWORK is to achieve the design of plans and programs focused on the analysis and identification of problems and health risks, formulation of public policies and programs, adoption of a mediator and spokesperson role (Government), prioritization of needs among necessities, development of programs and plans to respond to those needs, implementation of such programs, evaluation, review and periodic reformulation of the functioning of programs, information and education to the population with educational change projects using information and communication technologies such as cable, television and internet.

In summary, public health in Mexico = health promotion through: (a) Health system that understands integrity; (b) Education for disease prevention; (c) Diagnosis and treatment of disease; (d) Physical and social rehabilitation.

Most common diseases in our both urban and rural population are: (a) Diarrheal disease in children under 5 years (13% annual mortality); (b) Suicide under the influence of substances (7% annual mortality); (c) Respiratory diseases (27% annual mortality); (d) Viral transmission and dengue transmission; (e) Bacterial diseases; (f) Anemia in Mexican women (20%); (g) Child malnutrition (25%); (h) Obesity in children and adults (25% and 70% respectively); (i) Diabetes and cardiovascular disease (11%). Diabetes is now the leading cause of death in Mexico.

It is unlikely that these diseases will disappear. However, they may be prevented and, in some cases, delay or prevent their complications in order to decrease mortality. This is possible as long as it becomes a priority, the dialogue among community organizations, government, social movements formed in health and human rights is strengthened and also that they together develop a comprehensive analysis in the field of public health, considering the social, political and economic variables in health and their link with human rights.

* Issued without formal editing.